



Request for Field Trip

Date of Request

Campus Division/Department

Class/Section Instructor

Purpose of Field Trip

Facility Visited

Address/Location

Date and Time No. of Students

Mode of Transportation

Cost and Method of Payment

Other Information (*If applicable*)

I understand that I am required to obtain signed Student Field Trip Waivers for all students attending this field trip.

Signature of Faculty Member

Date

Recommended:

Division Dean

Date

Approved:

Vice Chancellor for Academic Affairs

Date